



Modified 02-03

PTO/SB/21 (01-03)
Approved for use through 9/30/00. OMB 0651-0031
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i> Mail Stop: AMENDMENT Express Mail Receipt No. Total Number of Pages in This Submission	Application / Conf. No.	10/644,132 / 5337
	Filing Date	August 20, 2003
	First Named Inventor	Jason H. Anderson
	Examiner Name	Binh C. Tat
	Art Unit	2825
	Patent No.	
Attorney Docket Number		X-946 US

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (with Recordation Cover Sheet)	<input type="checkbox"/> After Allowance Communication to
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Declaration / Oath	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Preliminary Amendment	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Affidavit(s)/declaration(s)	<input type="checkbox"/> Petition -	<input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> To Convert a Provisional Application	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Change Status to LARGE ENTITY	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	Three (3) references
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input checked="" type="checkbox"/> Information Disclosure Statement (Supplemental)	<input type="checkbox"/> Request for Refund	
<input checked="" type="checkbox"/> Substitute PTO-1449(s) IDS by Applicant (PTO/SB/08A)	Remarks	
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Customer Number	24309 (Customer Number)	Reg. Number 37,652
Attn: Kim Kanzaki		
Signature		
Date	December 19, 2005	Charge any additional fees required/credit any overpayment to our Deposit Account Number: 24-0040

CERTIFICATE OF MAILING			
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on this date:			
Typed or Printed Name	Pat Tompkins		
Signature	Pat Tompkins	Date	December 19, 2005

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.



JPW

PTO/SB/17 (10-02)

Approved for use through 10-31-2002. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL for FY 2005 <i>Patent fees are subject to annual revision</i>		Complete if Known		
		Application / Conf. No.	10/644,132 / 5337	
		Filing Date	August 20, 2003	
		First Named Inventor	Jason H. Anderson	
		Examiner Name	Binh C. Tat	
		Art Unit	2825	
TOTAL AMOUNT OF PAYMENT (\$)		180.00	Attorney Docket No.	X-946 US

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)																																																																																																													
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees, any additional fees required, and credit any over payments to: <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 24-0040 Deposit Account Name: XILINX, INC.		3. ADDITIONAL FEES <table border="1"><thead><tr><th>Large Entity Fee Code</th><th>Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>1051</td><td>130</td><td>Surcharge - late filing fee or oath</td><td></td></tr><tr><td>1052</td><td>50</td><td>Surcharge - late provisional filing fee or cover sheet.</td><td></td></tr><tr><td>1812</td><td>2,520</td><td>For filing a request for exparte reexamination</td><td></td></tr><tr><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr><tr><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr><tr><td>1251</td><td>120</td><td>Extension for reply within first month</td><td></td></tr><tr><td>1252</td><td>450</td><td>Extension for reply within second month</td><td></td></tr><tr><td>1253</td><td>1020</td><td>Extension for reply within third month</td><td></td></tr><tr><td>1254</td><td>1,530</td><td>Extension for reply within fourth month</td><td></td></tr><tr><td>1255</td><td>2,080</td><td>Extension for reply within fifth month</td><td></td></tr><tr><td>1401</td><td>500</td><td>Notice of Appeal</td><td></td></tr><tr><td>1402</td><td>500</td><td>Filing a brief in support of an appeal</td><td></td></tr><tr><td>1403</td><td>1000</td><td>Request for oral hearing</td><td></td></tr><tr><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr><tr><td>1452</td><td>110</td><td>Petition to revive - unavoidable</td><td></td></tr><tr><td>1453</td><td>1,370</td><td>Petition to revive - unintentional</td><td></td></tr><tr><td>1501</td><td>1,370</td><td>Utility issue fee (or reissue)</td><td></td></tr><tr><td>1460</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr><tr><td>1807</td><td>50</td><td>Petitions related to provisional applications</td><td></td></tr><tr><td>1806</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td>\$180</td></tr><tr><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr><tr><td>1809</td><td>790</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr><tr><td>1810</td><td>790</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr><tr><td>1801</td><td>790</td><td>Request for Continued Examination (RCE)</td><td></td></tr><tr><td colspan="3">Other fee (specify)</td><td></td></tr><tr><td colspan="2">SUBTOTAL (3)</td><td>(\$)</td><td>180.00</td></tr></tbody></table>		Large Entity Fee Code	Fee (\$)	Fee Description	Fee Paid	1051	130	Surcharge - late filing fee or oath		1052	50	Surcharge - late provisional filing fee or cover sheet.		1812	2,520	For filing a request for exparte reexamination		1804	920*	Requesting publication of SIR prior to Examiner action		1805	1,840*	Requesting publication of SIR after Examiner action		1251	120	Extension for reply within first month		1252	450	Extension for reply within second month		1253	1020	Extension for reply within third month		1254	1,530	Extension for reply within fourth month		1255	2,080	Extension for reply within fifth month		1401	500	Notice of Appeal		1402	500	Filing a brief in support of an appeal		1403	1000	Request for oral hearing		1451	1,510	Petition to institute a public use proceeding		1452	110	Petition to revive - unavoidable		1453	1,370	Petition to revive - unintentional		1501	1,370	Utility issue fee (or reissue)		1460	130	Petitions to the Commissioner		1807	50	Petitions related to provisional applications		1806	180	Submission of Information Disclosure Stmt	\$180	8021	40	Recording each patent assignment per property (times number of properties)		1809	790	Filing a submission after final rejection (37 CFR 1.129(a))		1810	790	For each additional invention to be examined (37 CFR 1.129(b))		1801	790	Request for Continued Examination (RCE)		Other fee (specify)				SUBTOTAL (3)		(\$)	180.00
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Kim Kanzaki	Registration No. (Attorney/Agent)	37,652
Signature		Telephone	408-879-6149
		Date	12-19-2005

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, P.O. Box 1450, Alexandria, Virginia, 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia, 22313-1450.